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703-68**CENTBAL FAX CENTER-**885 P004/025 F-459

DEC 1.5 2008 PTO/SB/30 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 (FY 2007 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H	CFR 1.136(a)	n of information unless it o	contains a valid OMB control number.
		B	.4:N. AUT 700
Application Number: 10/635,619		Docket Number (Optional): NIT-388 Filed: August 7, 2003	
For: ADVERTISEMENT MANAGEMENT METHOD			
Art Unit: 3688		Examiner: M.L.	Hamilton
This is a request under the provisions of 37 CFR 1.136(a) to extrapplication.	end the period for	filing a reply in the a	above identified
The requested extension and fee are as follows (check time period desir	ed and enter the ap	propriate fee below):	
	<u>Fee</u>	Small Entity	<u>Fee</u>
One month (37 CFR 1.17(a)(1))	\$130	\$60	\$130.00
Two months (37 CFR 1.17(a)(2))	\$490	\$230	\$
Three months (37 CFR 1.17(a)(3))	\$1110	\$ 525	\$
Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$
Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account			
Number 50-1417. I have enclosed a duplicate copy of this shee	t.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71.			
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
attorney or agent of record. Registration Nur	mber <u>34,663</u>	•	,
attorney or agent under 37 CFR 1.34.			
Registration number if acting under 37 CFR 1.34			
Name (Print/Type) Shrinath Malur		No. (Attorney/Agent)	34,663 Telephone Number: 703) 684-1120
Signature / / // /	1	scember 15, 2008	
NOTE: Signatures of all the inventors or assignees of record of the entire interesignature is required, see below.	st or their representat	ive(s) are required. Subm	K Hiddepic forms it more than one
Total of 1 forms are submitted.			
This collection of information is required by 37 CFR 1.114. The information is USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 12 including gathering, preparing, and submitting the completed application form on the amount of time you require to complete this form and/or suggestions for and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexand ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandrian	22 and 37 CFR 1.14. I o the USPTO. Time w reducing this burden, dria, VA 22313-1450. I	ins collection is estimated iii vary depending upon the should be sent to the Chie	e individual case. Any comments of information Officer, U.S. Patent

If you need assistance in completing the form, call 1-800-PTO-9199 and select option.

12/16/2008 VBUI11

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